



## APPLICATION FOR RECORDS RETENTION SCHEDULE

OFFICE OF THE SECRETARY OF STATE  
DEPARTMENT OF ARCHIVES AND HISTORY  
RECORDS MANAGEMENT DIVISION

**INSTRUCTIONS:** See Publication No. 76-RM-1 for instructions on completing this form. Forward signed original to Department of Archives and History, Records Management Division, 330 Capitol Avenue, Atlanta, Georgia, 30334, Attention: Scheduling Section.

FOR AGENCY USE		FOR RECORDS MANAGEMENT USE	
Application Date	1. Agency Address Department of Education Office of Instructional Services Division of Instructional Media Services 2054 Twin Towers East Atlanta, Georgia 30334	Application Number <b>83-20</b>	
Application Number		Date Received <b>DEC 20 1982</b>	Date Completed <b>JAN 24 1983</b>
2. Person to Contact Pat Cook		Working Title Secretary Senior	Telephone Number 656-5945
3. Action Requested a. <input checked="" type="checkbox"/> Establish Retention Schedule; record will continue to accumulate. b. <input type="checkbox"/> Dispose of present accumulation; no further accumulation anticipated. c. <input type="checkbox"/> Amend Application No. _____ Check One: <input type="checkbox"/> Change; <input type="checkbox"/> Supersede; <input type="checkbox"/> Void			
4. Dates of Series Earliest      Latest 1972      Present		5. Records Series Title (followed by title used in office, if different) Instructional Media Services Division Director's Correspondence Files	
6. Division and Office Function      What is the function of the Division and the Office in which this record series is created?  This division is responsible for the weekly daytime instructional programming of the Georgia Public Television Network; development, production and distribution of media products; media field services to local systems in media program development; field engineering services; services of the film and audio-tape libraries; and the development and management of special projects related to media.			
7. Record Series Description      This file contains the following documents (include form numbers and titles, if any): Attach samples of the file.  Documents relating to: Providing liason services between the Division and others within the Department and individuals, excluding memos and correspondence to and from local school systems.  Included are:  Correspondence, memoranda, etc., to other Department members and individual citizens, and related documents.     File is arranged: Chronologically by calendar year, thereunder chronologically by date.			
8. Monthly Reference Rate      How often are records referred to which are: One to six months old <u>24</u> ; Seven to twelve months old <u>24</u> ; Thirteen to twenty-four months old <u>12</u> ; twenty-five months and older <u>12</u> ?			
9. Annual Rate of Accumulation of Records Letter-size drawers _____; Legal-size drawers <u>1</u> ; Shelves _____; Other (specify) <u>1"</u>			

YES	NO	10. Questionnaire (Place an "X" in the proper column)
X		a. Is this the official copy of the series? If not, where is it?
	X	b. Does the series contain confidential information requiring security handling? If yes, cite law or regulation.
	X	c. Is this a vital record?
	X	d. Does this series have historical or long term research value?
	X	e. When one or two documents in the file make it necessary to keep the entire file for a long period, could these documents be scheduled separately?
	X	f. Is the information contained in this series ever published? If yes, attach copy.
	X	g. Is the information contained in this series ever analyzed and/or recorded in a summarized report? If yes, attach copy.
	X	h. Is there a duplication of this series in your office, or in another office or agency? If yes, where?
	X	i. Is this series (or a major portion of it) regularly microfilmed?
	X	j. Does the record series result in a computer printout?

#### 11. Retention Requirements

The following requires the series to be kept:

- |                          |              |                                   |              |
|--------------------------|--------------|-----------------------------------|--------------|
| a. State Law             | _____ years. | d. Audit period                   | _____ years. |
| b. Statute of limitation | _____ years. | e. Administrative need            | _____ years. |
| c. Federal law           | _____ years. | f. Federal retention instructions | _____ years. |

Attach copy or excerpt of laws or regulations. Explain administrative need.

Administrative office need

#### 12. Approved Disposition Instructions

This agency recommends that the file series be cut off at the end of each:

☒ Calendar Year; ☐ Fiscal Year; ☐ Other \_\_\_\_\_ then,

- ☒ Hold in the current files area \_\_\_\_\_ month(s) \_\_\_\_\_ year(s); then
- ☐ Transfer to local holding area, hold \_\_\_\_\_ year(s); then
- ☐ Transfer to State Records Center; hold \_\_\_\_\_ year(s); then
- ☒ Destroy.
- ☐ Transfer to State Archives for permanent retention.
- ☐ Other (Specify)

These instructions apply to all prior and future accumulations of the series.

Agency Head/Designee (Signature)	Date	Records Management Officer (Signature)	Date
<i>A. Wayman Culp</i>	<i>12/17/82</i>	<i>Walker L. Baumgardner</i>	<i>12/17/82</i>
Recommendations in paragraph 12 are approved. (If disapproved, attach letter of explanation.)		State Records Committee (Signature)	Date
		State Auditor/Designee	<i>1-19-83</i>
		Secretary of State/Designee	<i>1/17/83</i>
		Attorney General/Designee	<i>1-15-83</i>